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### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

#### CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s): Regina D. Holmes	Case No: 14-33422
This plan, datedJuly 23, 2014, is:	
the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces the confirmed or unconfirmed Plan dated.	
Date and Time of Modified Plan Confirming Hearing:	
Place of Modified Plan Confirmation Hearing:	
The Plan provisions modified by this filing are:	
Creditors affected by this modification are:	

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing. Objection due date: . Confirmation hearing is set for September 17, 2014 @ 11:10 a.m. 701 E. Broad Street, Richmond VA 5th Floor Rm 5100. If no objections are timely filed, a confirmation hearing will NOT be held.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$37,668.00

Total Non-Priority Unsecured Debt: \$19,790.27

Total Priority Debt: **\$0.00**Total Secured Debt: **\$31,019.60** 

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- **1. Funding of Plan.** The debtor(s) propose to pay the trustee the sum of \$400.00 Monthly for 55 months. Other payments to the Trustee are as follows: NONE . The total amount to be paid into the plan is \$ 22,000.00 .
- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$\_2,724.15 balance due of the total fee of \$\_3,000.00 concurrently with or prior to the payments to remaining creditors.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Creditor	Type of Priority	Estimated Claim	Payment and Term
Commonwealth of VA-Tax	Taxes and certain other debts	0.00	
			0 months
Internal Revenue Service	Taxes and certain other debts	0.00	
			0 months

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u> -NONE-

#### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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#### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor Collateral Description Collateral Description Monthly Payment TitleMax of Virginia 2000 Nissan Maxima Mileage: 110,000 25.00 Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

### D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

<u>Creditor</u> County of Henrico	Collateral Location: 104 Brenton Street,	Approx. Bal. of Debt or "Crammed Down" Value 1,479.00	Interest Rate <b>0%</b>	Monthly Paymt & Est. Term**
- DPU	Henrico, VA 23222			41 months
	Debtor believes that all post due amounts to Henrico have been paid and that the Judgment lien on the realty may not have been released in error. It is possible that this creditor may not file a claim.			
TitleMax of	2000 Nissan Maxima Mileage:	1,619.60	4.25%	
Virginia	110,000			41 months

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

#### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately \_\_10\_ %. The dividend percentage may fpfpfpvary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately \_\_0\_ %.
- B. Separately classified unsecured claims.

<u>Creditor</u> <u>Basis for Classification</u> <u>Treatment</u>

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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

Creditor	Collateral	Regular Contract Payment	Estimated Arrearage	Arrearage Interest Rate	Estimated Cure Period	Monthly Arrearage Payment
County of Henrico - DPU		Regular Monthly payment for service	0.00	<b>0</b> %	0 months	<u>r ayment</u>
Wells Fargo Home Mortgage	Location: 104 Brenton Street, Henrico, VA 23222	443.00	11,000.00	0%	41 months	

**B.** Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular			Monthly
		Contract	Estimated Interest	Term for	Arrearage
Creditor	Collateral	Payment	Arrearage Rate	Arrearage	Payment
-NONE-					

**C. Restructured Mortgage Loans to be paid fully during term of Plan.** Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

<u>Creditor</u>	<u>Collateral</u>	Rate	Claim	Monthly Paymt& Est. Term**
		<u>rtate</u>	<u> </u>	

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - **A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor	Type of Contract
-NONE-	

**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

-NONE-				
Creditor	Type of Contract	Arrearage	Payment for Arrears	Estimated Cure Period

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- 7. Liens Which Debtor(s) Seek to Avoid.
  - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor	Collateral	Exemption Amount		Value of Collateral
Bon Secours -	Location: 104 Brenton Street,	Va. Code Ann. § 34-4	\$1.00	29,400.00
RichmondHealth	Henrico, VA 23222			
Vion Holdings LLC	Location: 104 Brenton Street,	Va. Code Ann. § 34-4	\$1.00	29,400.00
_	Henrico, VA 23222			

**B.** Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor	Type of Lien	Description of Collateral	Basis for Avoidance
-NONE-	·		

- 8. Treatment and Payment of Claims.
  - All creditors must timely file a proof of claim to receive payment from the Trustee.
  - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
  - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
  - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- **Vesting of Property of the Estate.** Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:
  - (1) Upon confirmation of this plan, priority creditors are granted relief from the automatic stay only to the extent necessary to offset any pre-petition tax refund due to the debtor against any pre-petition tax liability owed by the debtor.
  - (2) Debtor's attorney's fees to be paid as a priority claim.
  - (3) The trustee can extend the plan up to 60 months to pay properly filed claims in this matter.
  - (4) The debtor will not MODIFY THE DEED, SELL, REFINANCE, OR MODIFY THE MORTGAGE without an order from the court.

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Signatures:		
Dated: Jur	ne 24, 2014	
/s/ Regina D.	Holmes	/s/ Pia J. North
Regina D. Hol	mes	Pia J. North 29672
Debtor		Debtor's Attorney
Exhibits:	Copy of Debtor(s)' Budget (Scheo Matrix of Parties Served with Pla	
I certify that on		Certificate of Service of the foregoing to the creditors and parties in interest on the attached Service List
	/s/ Pia	J. North
	Pia J. N	North 29672
	Signatu	re
		arbour Park Drive
		nian, VA 23112
	Address	S
	<u>(804) 7</u>	39-3700
	Telepho	one No.

Ver. 09/17/09 [effective 12/01/09]

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#### United States Bankruptcy Court Eastern District of Virginia

In re	Regina D. Holmes		Case No.	14-33422	
		Debtor(s)	Chapter	13	•

SPECIAL NOTICE TO SECURED CREDITOR
1. Bon Secours - RichmondHealth 8500 Magellan Parkway Building; Richmond, VA 23237
Bon Secours Richmond Health Cp Michael L. Goodman, Reg Agent 4501 Highwoods Pkwy; # 210 Glen Allen, VA 23060
Bon Secours Richmond Health Sy Goodman Allen Filetti, Reg Ag 4501 Highwoods Pkwy Ste 210 Glen Allen, VA 23060
Spinella, Owings & Shaia 8550 Mayland Drive Richmond, VA 23294-4704
2. Vion Holdings LLC 400 Interstate North Pkwy SE; Ste 800; Atlanta, GA 30339
Vion Holdings LLC Corporation Service Company 1111 East Main St 16th Floor Richmond, VA 23219
Glasser & Glasser, P.L.C. P. O. Box 3400 Norfolk, VA 23514
Consumer Portfolio Svc Po Box 57071 Irvine, CA 92619
Name of creditor
Location: 104 Brenton Street, Henrico, VA 23222
Description of collateral
The attached chapter 13 plan filed by the debtor(s) proposes ( <i>check one</i> ):
To value your collateral. <i>See Section 3 of the plan.</i> Your lien will be limited to the value of the collateral, and any amount you are owed above the value of the collateral will be treated as an unsecured claim.
To cancel or reduce a judgment lien or a non-purchase money, non-possessory security interest you hold. See

Section 7 of the plan. All or a portion of the amount you are owed will be treated as an unsecured claim.

To:

1.

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2. You should read the attached plan carefully for the details of how your claim is treated. The plan may be confirmed, and the proposed relief granted, <u>unless</u> you file and serve a written objection by the date specified <u>and</u> appear at the confirmation hearing.

Date objection due:	Not later than seven (7) days prior to the date set for the confirmation hearing. If no objections are timely filed, the confirmation hearing will NOT be held.
Date and time of confirmation hearing:	September 17, 2014 @ 11:10 a.m.
Place of confirmation hearing:	701 E. Broad Street, Richmond VA 5th Floor Rm 5100
	Regina D. Holmes  Name(s) of debtor(s)
	By: /s/ Pia J. North Pia J. North 29672
	Signature
	☐ Debtor(s)' Attorney ☐ Pro se debtor
	Pia J. North 29672
	Name of attorney for debtor(s) 5913 Harbour Park Drive
	Midlothian, VA 23112
	Address of attorney [or pro se debtor]
	Tel. # (804) 739-3700 Fax # (804) 739-2550
C	CERTIFICATE OF SERVICE
eby certify that true copies of the foregoing Not itor noted above by	tice and attached Chapter 13 Plan and Related Motions were served upon the
irst class mail in conformity with the re	equirements of Rule 7004(b), Fed.R.Bankr.P; or
certified mail in conformity with the rec	quirements of Rule 7004(h), Fed.R.Bankr.P
nis <b>July 23, 2014</b>	
	(a/ Dia I North
	/s/ Pia J. North
	Pia J. North 29672
09/17/09 [effective 12/01/09]	Pia J. North 29672

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Fill	in this information to identify your	case:					
Deb	otor 1 Regina D. F	lolmes					
	otor 2 use, if filing)						
Unit	ted States Bankruptcy Court for th	e: EASTERN DISTRICT	OF VIRGINIA				
	te number 14-33422		-			ed filing ent showing post-petition	
Of	fficial Form B 6I					as of the following date	:
	chedule I: Your Inc	ome			MM / DD/ Y	YYY	12/13
supį spoi attad	as complete and accurate as posplying correct information. If you use. If you are separated and you have a separate sheet to this form.  Describe Employment	are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your speith you, do not include	ouse is livi information	ing with you, incl on about your sp	lude information abou ouse. If more space is	ut your s needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	1
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed		☐ Emplo	•	
	employers.	Occupation	Nurse				
	Include part-time, seasonal, or self-employed work.	Employer's name	Autumn Care				
	Occupation may include student or homemaker, if it applies.	Employer's address	7600 Autumn Pkw Mechanicsville, V				
		How long employed to	here? <u>February</u>	2014			
Par	t 2: Give Details About Mo	nthly Income					
spou If yo	mate monthly income as of the cuse unless you are separated.  u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, co	,	·			J
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$_	3,490.50	\$	_
3.	Estimate and list monthly over	time pay.		3. +\$_	0.00	+\$ <u>N/A</u>	_
4.	Calculate gross Income. Add I	ine 2 + line 3.		4. \$_	3,490.50	\$ <u>N/A</u>	

Official Form B 6I Schedule I: Your Income page 1

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Deb	tor 1	Regina D. Holmes		C	Case number (if k	nown)	14-334	122		
	Cop	y line 4 here	4.		For Debtor 1	0.50		ebtor : iling s	2 or pouse N/A	
5.	_	all payroll deductions:					-			
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.		\$ ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	7.45 0.00 0.00 0.00 2.17 0.00	\$ \$ \$ \$		N/A N/A N/A N/A N/A N/A	
•	5h.	Other deductions. Specify:	_ 5h.				+ \$		N/A	
6. 7.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.		\$ 1,019 \$ 2,470		\$ \$		N/A	
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.			0.00	\$		N/A	
	8b.	Interest and dividends	8b.		\$	0.00	\$		N/A	
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Amortized tax refund Fed \$1,070  Other monthly income. Specify: State - \$0	8c. 8d. 8e.		\$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ + \$		N/A N/A N/A N/A	
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	<b>-</b> 9.	1	·	9.16	\$		N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,560.04	+ \$_		N/A	= \$	2,560.04
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					chedule 11.	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes						12.	\$	2,560.04
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?						Combir monthly	ied y income
		Yes. Explain: Debtor does not anticipate any changes in incom Household size of 2. 20 year old daughter lives in Wages estimted based on debtor working 50 - 60 work 50-60 hours every week.	n ho	us	e with Debto					

Official Form B 6I Schedule I: Your Income page 2

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Fill in	n this informati	on to identify	our case:					
Debto	or 1	Regina D.	Holmes			Check	if this is:	
	•	rtogina zi				□ An	amended filing	
Debte							_	post-petition chapter 13
(Spot	use, if filing)						penses as of the follo	
Unite	d States Bankr	uptcy Court fo	r the: EASTERN I	DISTRICT OF VIRG	INIA	N	MM / DD / YYYY	
Case (If kn		-33422					separate filing for Deaintains a separate he	ebtor 2 because Debtor 2 ousehold
Off	ficial For	m B 6J						
Scl	nedule J	: Your I	Expenses					12/1
Be as infor (if kn	complete and mation. If mon nown). Answer	accurate as pre space is need every question	ossible. If two mari ded, attach another n.		g together, both are equal On the top of any addition			
Part 1	Is this a joint	e Your House case?	enoia					
	No. Go to l	ine 2.						
			n a separate housel	old?				
	□ No □ Ye		st file a separate Sch	edule J.				
2.	Do you have d	lependents?	■ No					
	Do not list Deb Debtor 2.	otor 1 and	Yes. Fill out this each dependent		Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the	e dependents'						□ No
	names.	•						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
	Do your experexpenses of peryourself and y	ople other th	1 1 37					☐ Yes
expe	nate your expe	nses as of you		date unless you are	e using this form as a supp tal <i>Schedule J</i> , check the			
			on-cash governmen d it on <i>Schedule I:</i> 1				Your expo	enses
	The rental or and any rent fo			ur residence. Include	e first mortgage payments	4. \$		443.00
	If not include	d in line 4:						
	4a. Real est	ate taxes				4a. \$		0.00
	4b. Property	y, homeowner'	s, or renter's insuran	ce		4b. \$		0.00
			pair, and upkeep exp			4c. \$		100.00
			ion or condominium ents for vour reside		wity loops	4d. \$		0.00
J.	rauuuuullai MC	n iyaye DavM(	mis for vour reside	ice. such as nome ed	iuity iualis	.))		ti (it)

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Debtor 1	Regina D. Holmes	Case num	ber (if known)	14-33422
< T1.01				
6. Utili		60	¢	150.00
6a. 6b.	Electricity, heat, natural gas Water, sewer, garbage collection	6a. 6b.		
	Telephone, cell phone, Internet, satellite, and cable services	6c.	· ·	87.50
6c.	Other. Specify:			100.00
6d.	• • •	6d.		0.00
	d and housekeeping supplies	7.	\$	415.72
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	123.00
	onal care products and services	10.		80.00
	lical and dental expenses	11.	\$	80.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	181.82
	not include car payments.			
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ritable contributions and religious donations	14.	\$	0.00
	rance. not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	· · · · · · · · · · · · · · · · · · ·	15a.	\$	0.00
15a. 15b.	Health insurance	15a. 15b.	·	0.00
15c.	Vehicle insurance	15c.	· -	79.00
	Other insurance. Specify:	15d.		
		13u.	Φ	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20. iify: Personal Property Tax - \$140/year + Regis	16.	\$	20.00
	allment or lease payments:	10.	Ψ	20.00
7. <b>msa</b> 17a.	Car payments for Vehicle 1	17a.	\$	0.00
17a. 17b.	* *	17 <b>a</b> .	·	0.00
17c.	Other. Specify: Misc. expenses	176. 17c.		100.00
		17d.		
	Other. Specify: Vehicle upkeep 2000		Φ	100.00
8. You	r payments of alimony, maintenance, and support that you did not report as deduct n your pay on line 5, Schedule I, Your Income (Official Form 6I).	. <b>ea</b> 18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spec		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Schedule I:		ı e	
20a.	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.		0.00
20c.	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	* *	20d.		0.00
20d. 20e.	* * * *	20a. 20e.		
	er: Specify:	206.		0.00
1. Oth	or specify.	۷1.	-φ	0.00
	r monthly expenses. Add lines 4 through 21.	22.	\$	2,160.04
	result is your monthly expenses.			
3. Calo	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,560.04
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	2,160.04
23c.	Subtract your monthly expenses from your monthly income.	25	d.	400.00
	The result is your <i>monthly net income</i> .	23c.	\$	400.00
For e	You expect an increase or decrease in your expenses within the year after you file the xample, do you expect to finish paying for your car loan within the year or do you expect your mortgage mortgage?	is form?	increase or decreas	se because of a modification to the
ΠY	es. Explain:			

North & Casseialds 33422-KLP Doc 13couniled 07/23/14 prijered 07/23/14 prijes6:10 Desc Main 5913 Harbour Park Drive Midlothian, VA 23112

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Henrico, VA 23273

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Allstate Texas LLoyds Co 3075 Sanders Road Suite H1a Northbrook, IL 60062

Credit Collection Services Two Wells Avenue Newton Center, MA 02459

Spinella, Owings & Shaia 8550 Mayland Drive Richmond, VA 23294-4704

Bon Secours - RichmondHealth 8500 Magellan Parkway Building Richmond, VA 23237

Dominion Virginia Power P. O. Box 26543 Richmond, VA 23290

Sprint Bankruptcy Dept PO Box 172408 Denver, CO 80217-2408

Bon Secours Richmond Health Cp Michael L. Goodman, Reg Agent 4501 Highwoods Pkwy; # 210 Glen Allen, VA 23060

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Stern & Associates 415 N Edgeworth St Ste 2 Greensboro, NC 27401

Bon Secours Richmond Health Sy Goodman Allen Filetti, Reg Ag 4501 Highwoods Pkwy Ste 210 Glen Allen, VA 23060

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

TitleMax of Virginia 5200 Brook Road Richmond, VA 23227

Cap One Po Box 52530 Carol Stream, IL 60196 Glasser & Glasser, P.L.C. P. O. Box 3400 Norfolk, VA 23514

VCU Health System P.O. Box 758721 Baltimore, MD 21275

Commonwealth of VA-Tax P.O. Box 2156 Richmond, VA 23218-2156

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